Patient Engagement Learning Series

Managing Chronic Healthcare Amid COVID-19

Tuesday, April 7, 2020 at 2:00 pm ET
National Nurse-Led Care Consortium

The **National Nurse-Led Care Consortium (NNCC)** is a membership organization that supports nurse-led care and nurses at the front lines of care.

NNCC provides expertise to support comprehensive, community-based primary care and public health nursing.

- Policy research and advocacy
- Program development and management
- Technical assistance and support
- Direct, nurse-led healthcare services
Objectives

• Identify 2 chronic health conditions that increase vulnerability to COVID-19.
• Describe 2 ways to manage chronic pain while protecting themselves against COVID-19.
Panel Discussion

Shelley Bastos
Patient Representative
National Nurse-Led Care Consortium

Jillian Bird
Nurse Training Manager
National Nurse-Led Care Consortium

Ivy Clark
Patient Representative
National Nurse-Led Care Consortium

Marie O’ Brien
Integrative Pain Management Coordinator
Mather Hospital
Pop Up Question

What unique challenges are you currently facing in light of COVID-19 with engaging participants in pain management?

Credit: “The Great Wave off Kanagawa,” Hokusai
Helping Patients Manage Their Health in the Time of COVID-19

• Health care offices are seeking to minimize in-person appointments for those with chronic health conditions to prioritize urgent in-person needs and to minimize COVID exposure, especially for those vulnerable with chronic conditions.

• Telehealth visits seek to provide continuity of care to engage with patients around their health needs.

• As Shelter-at-Home and Social Distancing policies seek to “Flatten the Curve”, the longer these efforts continue, the more challenging routine health care becomes.
• With remote/brief visits, the advanced practice nurse and other health providers do not have the full suite of vitals, laboratory blood values, physical examination and screening measures to assess needs.

• Telehealth increases the emphasis on helping patients engage in their own personal wellness plans to achieve optimal health.

• With isolation at home, healthy behaviors such as physical activity, healthy eating, medication refilling, and stress reduction can be challenging.
Patient Motivation is Crucial!

• For the health care provider, it is essential we have sufficient patient buy-in and engagement to foster the necessary health behaviors to manage chronic health needs.

• This becomes more paramount with telehealth or brief visits
During Triaging of Needs – Crucial Role of Patient Engagement Dialogue & Motivational Interviewing

<table>
<thead>
<tr>
<th>Scale</th>
<th>Not at all</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
<th>8</th>
<th>9</th>
<th>Extremely Important</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Scale</th>
<th>Not at all</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
<th>8</th>
<th>9</th>
<th>Extremely Confident</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Nonpharmaceutical Interventions to Self-Manage Chronic Pain
“...I learned that pain isn’t the whole problem and the absence of pain isn’t the whole solution. I know that even if a miracle occurred and suddenly my pain was gone, everything would not be fine. There is more to the picture. I would still need to deal with the damage caused to myself and others because of my chronic pain.”

—Meditations for Pain Recovery by Tony Greco
CDC Guidelines for Pain Management (2016)

- Opioids shouldn’t be the front-line approach to treating non-cancer persistent pain
- A combination approach of:
  - **Medication**: NSAIDS
  - **Self-Management Strategies**
  - **Referral**: Physical/Occupational Therapy (movement / home care plan)
  - Referral: Health Behaviorist (e.g. Psychologist) to help with cognitive-behavioral Therapeutic strategies to help with coping skills for pain and reducing contributing factors (e.g. depression, anxiety)

Categories of Self-Management

- Therapeutic Modalities
- Behavioral Strategies
- Alternative & Complementary Therapies
- Online Self-Help & Apps
Therapeutic Modalities

• Heat
  • Hot Shower, Heating Pad, Warming Balms

• Electrical Stimulation
  • TENS-Unit

• Massage
  • Electronic Massagers, Massage Chair, Partner Massage, Self-Massage Techniques

• Soaking
  • Foot Massage, Epsom Bath

• Use of Assistive Technologies
  • Hand-Held Grappers, Foot Stools at Desk
Evidenced-Based Behavioral Strategies

- **Activity Pacing**
  - Slowly increasing your physical activity to improve stamina and strengthening, reducing pain experience

- **Relaxation Techniques**
  - Progressive Muscle Relaxation, Visualization, Deep-Breathing

- **Meditation**
  - Finding a good guided meditation can help with distraction and ongoing pain coping

- **Distraction Techniques**
  - Short-term techniques to cope with pain ranging from counting, cross-stitch, phone use, to visualizations
Evidenced-Based Behavioral Strategies

• **Cognitive-Behavioral Therapy**
  • Focuses on helping cope better with pain, by coping with pain thoughts, changing behaviors to assist with pain management, and help with emotional coping
  • Online (above) and free [Mobile App](#)

• **Acceptance Commitment Therapy**
  • Helps one come to a better degree acceptance with one’s pain, reducing catastrophizing and inactivity, to focus on priorities and goals in one’s life
  • Resources (above) and free [Mobile App](#)
Alternative & Complementary Treatments for Pain

- Yoga
- Acupuncture
- Reiki
- Therapeutic Massage
- Essential Oils / Aromatherapy
- CBD / Medical Marijuana
- Meditation
- Healthy Diet Changes
  - Avoiding Foods with Inflammatory Properties
  - Supplements
- T’ai Chi
- Supervised Exercise
- Music Therapy
- Dance / Creative Arts
Online Pain Support Groups

Guidelines for looking for a pain support group

- **Online- Chronic Pain Anonymous**
- **Call-In Groups** Pain Connection
- **Local In-Person** Groups
# Considerations in Promoting New Skills

### Don’ts
- Stop with a simple “no that didn’t work”
- Believe an explanation is enough

### Dos
- Discuss how they have applied techniques in past, emphasizing repeated practice
- Suggest an alternative
- Rationale/ demonstration is often needed
- Check Motivation/ Confidence
How can we best support participants with chronic health conditions during the COVID-19 pandemic?
What does it mean to you when you hear “patients with underlying health conditions are at risk”?
#YearOfTheNurse

2020

Nurse-Led Care
Thank you

Visit us on the web at nurseledcare.phmc.org

Follow us on social media at
facebook.com/nursingclinics
twitter.com/NurseLedCare
linkedin.com/company/national-nurse-led-care-consortium/